Attorney Docket No.: IS01271AP First Inventor: Brandes, Anita G. Title: SURFACE TREATMENT OF MECHANICALLY ABRADED GLASS 27902115

PATENT APPLICATION TRANSMITTAL

UTILITY

ally for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.:	FR3804?

(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express	ss Mail Label No.: ER380437802US						
APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application co	ontents)	ADD	PRESS TO:	Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450				
5. Oath or Declaration [Total Sheets	r program	8 a b	table or Com Nucleotide a (if appl Computer I Specification i.	CD-R in duplicate, large sputer Program (Appendix) and/or Amino Acid Sequence icable, all necessary) Readable Form (CFR) on Sequence Listing on: CD-ROM or CD-4 (2 copies); or Paper verifying identity of above copies NG APPLICATION PARTS Papers (cover sheet & document(s)) Statement Power of Attorney				
 a. X Newly executed (original or copy) b. Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6. Application Data Sheet. See 37 CFR 1.76 18. IF A CONTINUING APPLICATION, check appropriate box and supply 			12.					
specification following the title, or in an Application Data	Sheet under 3 nuation-in- F	PACE 1.76 Part (CIP) hich an oath or o	of prior a	pplication No. Art Unit: under Box 5b, is considered a part of the disclosure of				
19. CORRESPONDENCE ADDRESS								
Customer Number 22917 on Name Address City		Correspond	ence address b					
Country Telephone	State			Zip Code				
Name Brian M. Mancini	1, ,,,	Registr	ration No.	39,288				
SIGNATURE Signature		, 5	Date	November 25, 2003				

	Complete if Known							
FEE	FEE Application Number							
TRANSMITTAL	Filing Date		November 25, 2003					
Patent fees are subject to annual revision	First Named Ir	ventor	Brand	des, An	ita G.			
Applicant claims small entity status. See 37 CFR 1.27	Examiner Nam	ne						
	Group Art Unit							
TOTAL AMOUNT OF PAYMENT (\$) 810.00	Attorney Dock		IS012	 271AP				
METHOD OF PAYMENT (check all that ap		1	10012		E CALC	TA III	ION (continued)	
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Deposit Account Number 50-2117		Fee	Fee	Fee	Fee			
Deposit Account Name Motorola, In	C.	Code	(\$)	Code	(\$)		Fee Description	
The Director is authorized to: (check all that apply)		1051	130	2051	65		ge - late filing fee or oath	
X Charge fee(s) indicated below X Credit any	overpayments	1052 1053	50 130	2052 1053	25 130		ge – late Provisional filing glish specification	
Charge any additional fee(s) during the pendency of this	application	1812	2520	1812	2520	For filing	g a request for ex parte	
Charge fees(s) indicated below, except for the filling fee	n to the	1004	000*	1004	020*	Reexam		
above-identified deposit account.	e to tre	1804	920.	1804	920*		ng publication of SIR prior to er action	
		1805	1840*	1805	1840*		ting publication of SIR after er action	
FEE CALCULATION		1251	110	2251	55	Extensi	on for reply within first month	
		1252	420	2252	210		n for reply within second month	
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1. BASIC FILING FEE		i					n for reply within fourth month	
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Large Entity Small Entity Fee Fee Fee Fee		1401	330	2401	165		of Appeal brief in support of an appeal	
Code (\$) Code (\$)	Fee Paid	1403	290	2403	145	Reques	t for oral hearing to institute a public use	
_	· · · ·	1451	1510	1451	1510	proceed	ling	
1001 770 2001 385 Utility filing fee		1452	110	2452	55		to revive – unavoidable	
1002 340 2002 170 Design filling fee		1453	1330	2453	665		to revive – unintentional	
1003 530 2003 265 Plant filing fee 1004 780 2004 385 Reissue filing fee		1501 1502	1330 480	2501 2502	665 240		sue fee (or reissue) issue fee	-
1005 160 2005 80 Provisional filing fee		1503	640	2502	320	Plant is:		
, L		1460	130	1460	130		s to the Commissioner	
SUBTOTAL (1) (\$) 77	0.00	1807	50	1807	50	Process	sing fee under 37 CFR 1.17(q)	
2. EXTRA CLAIM FEES		1806	180	1806	180	Submis	sion of IDS	
Previously Extra Fee fr Paid** Claims belov		8021	40	8021	40		ng each patent assignment erty (times number of properties)	40
Total Claims 19 - 20 = 0 X 18	= 0	1809	770	2809	385	Filing a	submission after final	
Independent Claims 3 - 3 = 0 X 86	= 0	1010		0010		•	1 (37 CFR § 1.129(a))	
Multiple Dependent 290	=	1810	770	2810	385		h additional invention to be ed (37 CFR § 1.129(b))	
Large Entity Small Entity		1801	770	2801	385		t for Continued Examination	
Fee Fee Fee Fee Code (\$) Code (\$) Fee Descri	ption	1802	900	1802	900	RC8) Reques	t for expedited examination	
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess o	13 ·	Other fee	(enocifu)			of a	design application	
1203 280 2203 140 Multiple dependent claim, if not		Otherice	(apecity)	-				
1204 84 2204 42 * Reissue independent claims o	ver original patent							
1205 18 2205 9 *Reissue claims in excess of 20	and over original							
Patent CLUDTOTAL (2) (C) 40 00								
SUBTOTAL (2) (\$) 0.00 **or number previously paid, if greater; For Reissues, see above. SUBTOTAL (3) (\$) 40.00 *Reduced by Basic Filing Fee Paid								
SUBMITTED BY							Complete (if applicable	e)
Name (Print/Type) Brian M. Mancini		Registrat	tion No.	39,28	38	T	elephone 847-57	6-3992
Signature					Da	ate	November 25, 2003	